

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. _____
Registered No. _____

1. PLACE OF BIRTH

County Yila State _____
District or Township _____ or Village _____
City Winkelman No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Lynia Pachella
(If child is not yet named, make supplemental report, as directed.)

3. Sex of Child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other. _____ 5. No., in order of birth. _____ 6. Legitimate? Yes 7. Date of birth Nov 21 1929
Month Day Year

8. FATHER Full name Raymond Pachella 9. Residence (Usual place of abode) Ray Ariz. If non-resident, give place and state. 14. MOTHER Full maiden name Francis Bracamonte 15. Residence (Usual place of abode) Ray Ariz. If non-resident, give place and state.

10. Color or race Mex 11. Age at last birthday 29 (Years) 16. Color or race Mex 17. Age at last birthday 26 (Years)

12. Birthplace (city or place) Florin Ariz (State or country) 18. Birthplace (city or place) Phoenix Ariz (State or country)

13. Occupation Drug Clerk Nature of Industry 19. Occupation Housewife Nature of Industry

20. Number of children of this mother 2 (Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living 2 (b) Born alive but now dead 0 (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was _____ at _____ on the date above stated

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature Charles K. Huth (Physician or midwife)

Given name added from a supplemental report _____ Address Hayden Ariz

Filed Dec 5 1929 P. J. Hutton Registrar

Registrar

371-1121-625